DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PULL-OUT SHELF					
the application of which is attached hereto	OR	■ was filed on March 11, 200 Number or PCT International Application (Confirmation No), and March 11, 2002 (if applications)	ion Number,		
I hereby state that I have reviewed and und by any amendment specifically referred to a		nts of the above identified application,	including the claims, as amended		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part application(s), material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.					
I hereby claim foreign priority benefits under or plant breeder's rights certificate(s), or 36 than the United States of America, listed be patent, inventor's or plant breeder's rights capplication on which priority is claimed.	65(a) of any PCT elow and have all	international application(s) which desi so identified below, by checking the b	gnated at least one country other ox, any foreign application(s) for		
	G		Priority Claimed		
Prior Foreign Application Number(s)	Country Sweden	Foreign Filing Date 9 September 1999	Yes No		
I hereby claim domestic priority benefits un States provisional application(s), or §365(c) insofar as the subject matter of each of international application in the manner provito disclose any information material to the filing date of the prior application and the natural states.) of any PCT Into the claims of the vided by the first patentability of the	ernational application(s) designating the is application is not disclosed in a list paragraph of Title 35, United States Cohis application as defined in 37 C.F.R.	e United States, listed below and, sted prior United States or PCT de, §112, I acknowledge my duty 1.56 which occurred between the		
Prior U.S. or International Application Number	er(s)	U.S. or International Filing Date	Status		
I hereby appoint all attorneys of SUGHRI	IE MION, PLI	C who are listed under the USPTO C	ustomer Number shown below as		

I hereby appoint all attorneys of **SUGHRUE MION**, **PLLC** who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

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PATENT TRADEMARY OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:						
Given Name (first and middle [if any]) Pedro		Family Name or Surname Cunha				
Inventor's Signature Pedu	-	Date	2002-03-27			
Residence: City Hestra 400	State	Country Sweden	-	Citizenship Swedish		
Mailing Address: Vikgatan 26, SE-330 27 Hestra, Sweden						
_{City} Hesta	State	Zip SE-330 27		Country Sweden		
NAME OF SECOND INVENTOR:						
Given Name (first and middle [if any]) Family Name or Surname						
Inventor's Signature			Date			
Residence: City	State	Country		Citizenship		
Mailing Address:						
City	State	Zip		Country		
NAME OF THIRD INVENTOR:						
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature		Date				
Residence: City	State	Country		Citizenship		
Manling Address:						
City	State	Zip		Country		
NAME OF FOURTH INVENTOR:						
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature		Date				
Residence: City	State	Country		Citizenship		
Mailing Address:						
City	State	Zip		Country		
NAME OF FIFTH INVENTOR:						
Given Name (first and middle [if any])	Family Name or Surnam	uily Name or Surname				
Inventor's Signature		Date				
Residence: City	State	Country		Citizenship		
Mailing Address:						
City	State	Zip		Country		